



CITY OF EAST PROVIDENCE
DEPARTMENT OF PARKS AND RECREATION

145 Taunton Ave
East Providence, RI 02914
(401) 435-7756

APPROVED: _____
PERMIT #: 05-_____
PERMIT EXPIRATION DATE:

APPLICATION FOR TREE PERMIT

APPLICATION DATE: _____ FEE RECEIVED: \$ _____ BY: _____

1. APPLICANT NAME: _____

2. ADDRESS: _____

3. PHONE NUMBER: (_____) _____ EMAIL ADDRESS: _____@_____

4. LOCATION OF TREE(S) IF DIFFERENT FROM ABOVE ADDRESS: _____

REQUEST TO REMOVE TREE ON PUBLIC PROPERTY AT OWN EXPENSE

{Rev. Ords. 1987 Sec. 16-61 (h) (2)}

Reason for removal+: _____

Name of Company/Arborist: _____ RI Arborist Lic#: _____

Tree Species: _____ D.B.H. of tree(s) being removed: _____

Permits filled and approved by Building/Engineering and/or any City/State Agency with jurisdiction: __YES __NO

Permit #/Dept: _____ Permit #/Dept: _____ Permit #/Dept: _____

City Forester Review:
Replanting required:
of trees required: _____

**Application must include from Company/Arborist: Certificate of Insurance with City of East Providence co-insured.
Proof of current RI Workman's Compensation Insurance.*

**All work shall conform to applicable City, State, OSHA, ANSI and ISA regulations and guidelines.*

**All material shall be removed from site. Stump shall be removed or grinded 5" below surface grade.*

**DIGSAFE shall be notified prior to removal or grinding.*

**+Request for removal of a live/healthy tree must be for utility installation (water, sewer), and/or approved construction.*

REQUEST TO PLANT TREE ON PUBLIC PROPERTY AT OWN EXPENSE

(Rev. Ords. 1987 Sec. 14-58)

Number of trees to be planted: _____{if more than 6 see Rev. Ords. 1987 Sec. 14-58 (c) (1)(2)}

Is site under power lines: __YES __NO

Is there a sidewalk in planting area: __YES* __NO

Tree species desired (see Parks Approved Tree List): _____

Planting performed by: _____

Date of proposed planting: ____/____/____

Trees planted within the public right of way become the legal responsibility of the City of East Providence regardless if planted with private or public funds. Tree well shall have a minimum pit size of 32 inches by 48 inches.

** Permit for sidewalk cut must first be obtained from Engineering Div., Dept. of Public Works, City Hall*

REQUEST TO PRUNE STREET TREE AT OWN EXPENSE

Of trees to be pruned: _____

Approx. date of work: _____

Name of Company/Arborist: _____

RI Arborist Lic#: _____

- *All material must be removed from site. No material may block sidewalk or right of way.
- *If a police traffic detail is needed applicant will be responsible for payment.
- *Application must include from Company/Arborist: Certificate of Insurance with City of East Providence co-insured.
- *Proof of current RI Workman's Compensation Insurance

Applicant agrees to comply with all of the applicable sections of the City of East Providence Revised Ordinances and standard specifications. All tree removal will be done to I.S.A. and ANSI standards. All replacement trees shall be planted to city standards and approved by the City prior to the expiration date of this permit. In consideration of the granting of this permit and other good and valuable consideration therefore, the undersigned intending to be legally bound does hereby for the undersigned and the heirs, executors, administrators and assigns of the undersigned agree to release, indemnify and hold harmless the city of East Providence and its officers, agents, employees and representatives from and against all losses, damages, liability for injury to or death of persons, and/or liability for damage to property, suits, claims, costs and charges which any person or corporation may directly or indirectly suffer arising from any and all work herein permitted or, incidental thereto of which may arise from failure of permittee or its agent to perform the obligations of permittee under this permit.

X

Signature

Date